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UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF NORTH CAROLINA

IN RE:

BARBARA LANGLEY LEVINER 103 GREEN CHAPEL CHURCH ROAD

HAMLET, NC 28345

CASE NO. 20-10793

JUDGE BENJAMIN A. KAHN

DEBTOR

SSN(1) XXX-XX-9465

DATE: 05/06/2021

REPORT OF FILED CLAIMS

Pursuant to 11 U.S.C. §704(5), the trustee has examined the proofs of claims filed in this case and objected to the allowance of such claims as appeared to be improper except where no purpose would have been served by such objection. After such examination and objections, if any, the trustee states that claims should be deemed allowed or "not filed" as indicated below.

CHARLOTTE RADIOLOGY	
CHARLOTTE, NC 28203 NAME ID: 178736 CLAIM #: 0007 COMMENT: CREDIT CENTRAL LLC 700 E NORTH ST STE 15 GREENVILLE, SC 29601 NAME ID: 169064 CLAIM #: 0008 COMMENT: FIRST HEALTH OF THE CAROLINAS P O BOX 3000 PINEHURST, NC 28374 NAME ID: 118394 CLAIM #: 0009 COMMENT: INTERNAL REVENUE SERVICE P O BOX 7346 PHILADELPHIA, PA 19101-7346 PHILADELPHIA, PA 19101-7346 PO BOX 772813 CHICAGO, IL 60677-2813 CHICAGO, IL 60677-2813 LVNV FUNDING LLC RESURGENT CAPITAL SERVICES P O BOX 10587 P O BOX 10587 RAME ID: 43307 RCT: 5063 GREENVILLE, SC 29603-0587 NAME ID: 43307 CLAIM #: 0011 COMMENT: COMMENT: U) UNSECURED (U) UNSECURED (U) U	
CLAIM#: 0007 COMMENT:	
CREDIT CENTRAL LLC 700 E NORTH ST STE 15 GREENVILLE, SC 29601 NAME ID: 169064 CLAIM #: 0008 CCMMENT: FIRST HEALTH OF THE CAROLINAS P O BOX 3000 PINEHURST, NC 28374 NAME ID: 118394 CLAIM #: 0009 PINEHURST, NC 28374 NAME ID: 118394 CLAIM #: 0009 COMMENT: INTERNAL REVENUE SERVICE P O BOX 7346 PHILADELPHIA, PA 19101-7346 NAME ID: 123770 CLAIM #: 0001 S6,262.37 VAME ID: 1283770 CLAIM #: 0001 COMMENT: INTERNAL REVENUE SERVICE P O BOX 772813 CHICAGO, IL 60677-2813 NAME ID: 158804 ACCT: 1691 CLAIM #: 0011 COMMENT: LVNV FUNDING LLC S1,418.71 VAME ID: 43307 RESURGENT CAPITAL SERVICES P O BOX 10587 RESURGENT CAPITAL SERVICES P O BOX 10587 CLAIM #: 0012 COMMENT: CAPICAL NC DEPARTMENT OF REVENUE \$0.00 P) PRIORITY COMMENT: CARE CREDIT NC DEPARTMENT OF REVENUE \$0.00 P) PRIORITY	
Toole North St Ste 15	
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CLAIM #: 0008 COMMENT:	
FIRST HEALTH OF THE CAROLINAS P O BOX 3000 INT: .00% NOT FILED NAME ID: 118394 ACCT: UNTS CLAIM#: 0009 COMMENT: INTERNAL REVENUE SERVICE P O BOX 7346 PHILADELPHIA, PA 19101-7346 INT: .00% NOT FILED NAME ID: 123770 ACCT: 9465 CLAIM#: 0001 COMMENT: JEFFERSON CAPITAL SYSTEMS LLC P O BOX 772813 CHICAGO, IL 60677-2813 NAME ID: 158804 CLAIM#: 0011 COMMENT: 421TFCL LVNV FUNDING LLC RESURGENT CAPITAL SERVICES P O BOX 10587 NAME ID: 43307 ACCT: 5063 GREENVILLE, SC 29603-0587 CLAIM#: 0012 COMMENT: CARE CREDIT N C DEPARTMENT OF REVENUE \$0.00 (P) PRIORITY	
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GREENVILLE, SC 29603-0587 CLAIM #: 0012 COMMENT: CARE CREDIT N C DEPARTMENT OF REVENUE \$0.00 (P) PRIORITY	
N C DEPARTMENT OF REVENUE \$0.00 (P) PRIORITY	
BANKRUPTCY UNIT INT: .00% NOT FILED	
P O BOX 1168 NAME ID: 9699 ACCT: 9465	
RALEIGH, NC 27602-1168 CLAIM #: 0002 COMMENT:	
ONEMAIN FINANCIAL GROUP LLC \$10,957.50 (V) VEHICLE-SECURED	
P O BOX 3251 INT: 5.25%	
EVANSVILLE, IN 47731-3251 NAME ID: 162216 ACCT: 5542	
CLAIM #: 0005 COMMENT: 17NISS	

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AMOUNT	CLASSIFICATION
\$2,961.72	(U) UNSECURED
NAME ID: 162216	ACCT: 5542
CLAIM #: 0006	COMMENT: SPLIT
\$12,001.07	(U) UNSECURED
INT: .00%	
NAME ID: 162216	ACCT: 8059
CLAIM #: 0010	COMMENT:
\$52.00	(Z) SPECIAL COST ITEM
INT: .00%	
NAME ID: 1885	ACCT:
CLAIM #: 0013	COMMENT:
\$337.81	(S) SECURED
INT: 8.00%	
NAME ID: 28281	ACCT: 2048
CLAIM #: 0004	COMMENT: OC,TAXES
\$0.00	(P) PRIORITY
INT: .00%	NOT FILED
NAME ID: 146761	ACCT:
CLAIM #: 0003	COMMENT:
\$36,344.06	
\$4,500.00	ATTORNEY FEE
	\$2,961.72 INT: .00% NAME ID: 162216 CLAIM #: 0006 \$12,001.07 INT: .00% NAME ID: 162216 CLAIM #: 0010 \$52.00 INT: .00% NAME ID: 1885 CLAIM #: 0013 \$337.81 INT: 8.00% NAME ID: 28281 CLAIM #: 0004 \$0.00 INT: .00% NAME ID: 146761 CLAIM #: 0003

ANITA JO KINLAW TROXLER, TRUSTEE 500 W FRIENDLY AVE STE 200 P O BOX 1720 GREENSBORO, NC 27402-1720

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NOTICE OF FILING OF REPORT OF FILED CLAIMS

The foregoing Report of Filed Claims has been filed with the Bankruptcy Court based on an audit of claims filed in the Trustee's office. The claims are allowed unless objection is made by the Debtor or other party in interest.

Any objection to a claim should be filed in writing with the Bankruptcy Court at the address below and a copy must be served on the Trustee:

Clerk, U.S. Bankruptcy Court 101 S. Edgeworth Street P.O. Box 26100 Greensboro, NC 27420-6100

If an objection is filed, a hearing will be scheduled before the Court. The Trustee will continue making disbursements on the claims unless an objection is filed.

Date: 05/06/2021 OFFICE OF THE CHAPTER 13 TRUSTEE

By: /s/ Gayle McFarland Clerk Chapter 13 Office 500 W FRIENDLY AVE STE 200 P O BOX 1720 GREENSBORO, NC 27402-1720

cc: Debtor

Attorney for Debtor - Electronic Notice